



DEPARTMENT OF THE NAVY  
OFFICE OF THE SECRETARY  
1000 NAVY PENTAGON  
WASHINGTON, DC 20350-1000

**SECNAV INSTRUCTION 1850.4E**

From: Secretary of the Navy

Subj: DEPARTMENT OF THE NAVY (DON) DISABILITY EVALUATION MANUAL

Ref: (a) Title 10, United States Code  
(b) DOD Directive 1332.18 of 4 Nov 96 (NOTAL)  
(c) DOD Instruction 1332.38 of 14 Nov 96 (NOTAL)  
(d) DOD Instruction 1332.39 of 14 Nov 96 (NOTAL)  
(e) SECNAVINST 5300.30C  
(f) Manual of the Medical Department  
(g) SECNAVINST 1770.3B  
(h) Manual of the Judge Advocate General  
(i) SECNAVINST 5212.5D

Encl: (1) Table of Contents and DON Disability Evaluation System (DES) Summary  
(2) Abbreviations and Definitions  
(3) Disability Evaluation Policies  
(4) Physical Evaluation Board (PEB) Procedures  
(5) Petitions for Relief (PFR)  
(6) Permanent Limited Duty (PLD) Procedures  
Attachment:  
(a) Request for Permanent Limited Duty  
(7) Officer Disability Review Board (ODRB) Procedures  
(8) Medical Conditions and Physical Defects Which Normally are Cause Referral to the Physical Evaluation Board (PEB)  
Attachments:  
(a) Minimum Requirements for Medical Evaluation Board (MEB), Addenda and Narrative Summary with Annotations  
(b) Conditions Not Constituting a Physical Disability  
(c) Sample MEB report  
(d) Plates  
(9) Special Instructions and Explanatory Notes, VASRD  
Attachments:  
(a) Analogous Codes  
(b) SWATO Undiagnosed Symptom Complex Coding  
(c) Tables  
(10) What You Need to Know about the Physical Evaluation Board  
(11) Non-Medical Assessments (NMA)

Attachment:

(a) Sample Non-Medical Assessment Questionnaire/Narrative Summary

(12) Death Imminent Procedures

Attachment:

(a) Death Imminent Processing

(13) Waiver of Disability Processing

(14) Master Index

**1. Purpose.** To revise and simplify policies and procedures for evaluation of physical fitness for duty and disposition of physical disability in the Department of the Navy in compliance with Chapter 61 and Section 1554 of reference (a) and with references (b) through (e). This instruction is a complete revision and should be reviewed in its entirety.

**2. Cancellation.** SECNAVINST 1850.4D. All other regulations, Director Naval Council of Personnel Boards (DIRNCPB) and President, PEB (PPEB) policy letters, and memoranda providing guidance governing disability evaluation, medical processing for disability evaluation, disability separation, PLD status, and PEB organization, procedures and delegations inconsistent with this instruction are cancelled.

**3. Authority.** Elements of the Department of the Navy Disability Evaluation System listed below are designated and directed to act on behalf of the Secretary of the Navy (SECNAV) to make determinations as to fitness for active and reserve duty of Navy and Marine Corps members, entitlements to disability benefits, and disposition of members properly referred for physical disability evaluations:

a. Informal PEB (formerly the Record Review Panel)

b. Formal PEB (formerly the Hearing Panels)

c. President, PEB

Physical Evaluation Board  
Naval Council of Personnel Boards  
720 Kennon Street, S.E. Rm 309  
Washington Navy Yard, D.C. 20374-5023

d. DIRNCPB

Director, Naval Council of Personnel Boards  
720 Kennon Street, S. E. Rm 309  
Washington Navy Yard, D. C. 20374-5023

Website: [www.hq.navy.mil/ncpb/](http://www.hq.navy.mil/ncpb/)

Officers comprising these elements shall be governed by the enclosures to this instruction in performing their responsibilities.

#### **4. Responsibility**

a. Physical Evaluation Board. Subject to limitations contained in this instruction, acts on behalf of SECNAV to make determinations of Fitness to continue naval service, entitlement to benefits, disability ratings, and disposition of service members referred to it. Composition and procedures are contained in enclosure (4) to this instruction.

b. Assistant Secretary of the Navy for Manpower and Reserve Affairs (ASN (M&RA)). Responsible for management oversight of the DES and for resolution of disability cases referred to the SECNAV under this instruction.

c. Director, Naval Council of Personnel Boards (DIRNCPB)

(1) Assigned overall responsibility for the management, integrity and efficiency of the PEB. In that regard, DIRNCPB may issue internal instructions within the DES to further interpret, implement and govern the workings of the PEB, and coordinates closely with the Chief, Bureau of Medicine and Surgery (CHBUMED) on issues that impact non-PEB portions of the DES.

(2) As the Secretary's principal agent in overseeing the PEB, DIRNCPB may stop action on and refer any case to ASN (M&RA) for resolution should the Director disagree with the disposition proposed by the PEB.

(3) DIRNCPB directs disability separations and retirements. In cases where the service member also is undergoing disciplinary or administrative discharge proceedings which result in a punitive discharge or administrative discharge for misconduct, disability separation is superceded.

(4) Any opinion of the Office of the Judge Advocate General (OJAG) involving an issue of law shall be binding on the PEB and DIRNCPB. If the OJAG determines that there are insufficient facts to support a finding, DIRNCPB may accept the opinion and order appropriate action, return the case to a cognizant authority for more information, or appeal the decision to SECNAV for final resolution.

(5) DIRNCPB shall:

(a) assign, supervise, and direct activities of the President, PEB;

(b) provide budget, facilities, automated data processing, and personnel

support to the PEB;

(c) establish billet/position assignment criteria for all elements within the DES;

(d) provide training for Physical Evaluation Board Liaison Officer (PEBLO) and Collateral Duty Counselors;

(e) provide training for line and medical officers assigned to the PEB;

(f) provide for quality assurance review of the PEB;

(g) submit recommendations to ASN(M&RA) for legislative proposals, Department of Defense (DOD) matters, and changes to this instruction;

(h) maintain appropriate liaison with the Office of the Secretary of Defense, Department of Veterans Administration (VA), Chief, Naval Personal (CHNAVPERS), Commandant of the Marine Corp for Manpower and Reserve Affairs CMC (M&RA), Commander, Naval Reserve Forces (COMNAVRESFOR), CHBUMED, and OJAG in matters associated with the DES;

(i) provide advisory opinions to the Board for Correction of Naval Records (BCNR) upon request;

(j) provide responses to Congressional interest letters (Congrints);

(k) inform ASN (M&RA) of matters of interest;

(l) protect the privacy of individuals evaluated by the PEB;

(m) maintain a system of records, including PEB records and correspondence files; and

(n) perform such other specific duties and exercise such other discretionary authority as elsewhere set forth in this instruction.

(o) DIRNCPB shall submit a management report of the PEB, within 30 days of the end of each Fiscal Year (FY), including evaluations in the following areas, to ASN (M&RA), with copies to the CNO and CMC:

1. Informal PEB Statistics. Category will report FY-data in the following four areas:

a. Cases carried from the previous FY (Active Duty/Inactive Duty Reservists; and Temporary Disability Retirement List (TDRL).

b. Cases received during current FY (Active Duty/Inactive Duty Reservists; and TDRL).

c. Cases reviewed/completed; and terminated.

d. Cases pending at end of FY (Active Duty/Inactive Duty Reservists; and TDRL).

2. Formal PEB Statistics. Category will report FY-data in the following two areas:

a. Active Duty/Inactive Duty Reservists cases scheduled at Bethesda, MD and San Diego, CA.

b. TDRL cases scheduled at Bethesda, MD and San Diego, CA.

3. Petitions for Relief (PFR) to DIRNCPB. Category will report FY-data in the following two areas:

a. Number of PFRs received.

b. Number of PFRs pending.

4. Additional Workload Statistics. Category will report FY-data in the following four areas:

a. Number of referrals from BCNR.

b. BCNR cases pending.

c. Congressional inquiries received.

d. Congressional inquiries pending.

5. Significant Issues Adversely Affecting PEB Processing. Issues adversely affecting cases processing and developing trends.

(6) DIRNCPB is responsible for the conduct, efficient resourcing, and personnel management of the PEB as prescribed in this instruction. DIRNCPB shall:

(a) Propose, in coordination with CNO, CMC, and the Surgeon General, changes to the DES as appropriate.

(b) Request ASN (M&RA) recommend to Assistant Secretary of Defense for Force Management Policy (ASD (FMP)) changes to references (c) and (d) which serve the needs of the Department of the Navy and naval personnel.

(c) Issue under signature, on behalf of SECNAV, the final Department of the Navy determination in special interest cases, and cases in which relief were granted on the basis of Petitions for Relief.

(d) Liaison with the Department of Defense, Navy, Marine Corps, OJAG, CHBUMED, and other governmental agencies in matters relating to the DES. Keep ASN (M&RA) apprised of actions and issues that might modify or impact the effectiveness of Department of the Navy policies and programs under this instruction.

d. Chief of Naval Operations (CNO) and Commandant of the Marine Corp (CMC). Are responsible for management of medical treatment facilities (MTFs), line of duty investigations, Reserve personnel Notice of Eligibility status, Permanent Limited Duty (PLD) members, and the TDRL in their respective service to meet the policy and procedural objectives in this instruction. CNO and CMC are required to provide alternate and reserve members for service on the PEB upon request of the President, PEB. CNO and CMC have delegated the following responsibilities to the following:

(1) CHNAVPERS and CMC (M&RA)

(a) CHNAVPERS and CMC (M&RA) are assigned certain personnel management actions in support of naval disability evaluation policy.

(b) CHNAVPERS and CMC (M&RA) may, after consultation with the President, PEB, withdraw or suspend any case from any stage of the PEB process for good and sufficient reason. In cases where the member is to be retired or separated, the member need not meet the ability to perform the full military duty standard during the separation physical in order to be separated or retired.

(c) CHNAVPERS and CMC (M&RA) shall:

1. provide statements of naval service and access to fitness reports and performance evaluations for review by the PEB;

2. take action on requests for continuance on active duty in a PLD status, authorize retention on PLD, and administer those personnel consistent with guidance in enclosure (6) of this instruction;

3. accomplish appropriate disposition of members whose disability evaluation has been completed (see paragraph 2022);

4. administer the TDRL as specified in part 6 of enclosure (3);

5. recommend to ASN (M&RA) via the DIRNCPB appropriate changes to this instruction; and

6. perform such other specific duties and exercise such other discretionary authority as elsewhere set forth in this instruction.

(2) CHBUMED. Under the CNO, is responsible for the Medical Treatment Facilities (MTF) compliance within the time standards specified in paragraphs 1008 and 1009 of enclosure (1), for professional medical support of the DES as required in this instruction, and for ensuring reference (f) conforms with this instruction.

(a) Responsible for the efficiency of processing and overall quality of Medical Board reports prepared within the Department of the Navy. In addition, CHBUMED shall provide medical and medical personnel support to the DES, and advice to SECNAV and ASN (M&RA) upon request.

(b) CHBUMED shall:

1. ensure MTF commanding officers provide Medical Board reports to the PEB and further medical support as required by the DIRNCPB, President, PEB, CHNAVPERS, CMC (M&RA), or COMNAVRESFOR in support of the DES;

2. ensure MTF commanding officers establish medical board membership and procedural rules in compliance with this instruction, and professional medical guidance in accordance with accepted medical standards;

3. develop and provide professional training to Medical Corps Officers in proper preparation of Medical Board reports to ensure clear, concise, complete, and timely reports;

4. ensure MTF commanding officers establish and maintain a review of Medical Board reports to ensure the completeness and competency of preparation.

5. provide additional information as requested by the PEB;
6. nominate Medical Corps officers of requisite education and experience to serve on the PEB;
7. recommend to ASN (M&RA) via DIRNCPB appropriate changes to this instruction; and
8. perform such other specific duties and exercise such other discretionary authority as elsewhere set forth in this instruction.

(3) COMNAVRESFOR and CMC (M&RA). COMNAVRESFOR and CMC (M&RA) under guidelines of reference (g), shall provide advisement attached to medical boards for Ready Reservists if a Notice of Eligibility has not been granted.

(4) Judge Advocate General (JAG). Is responsible for reviews for legal sufficiency in classes of cases specified in this instruction, for adjustments to procedural requirements for Line of Duty determinations in reference (h), for support of requirements within this instruction, and for assigning qualified judge advocates to act as legal counsels for members appearing before PEB Formal Boards.

(a) JAG shall provide legal resources to support the DES; take such other actions as directed by statute and this instruction.

(b) JAG shall:

1. review for legal sufficiency, in accordance with 10 U.S.C. 5148, PEB determinations in which an officer is to be retired for disability;
2. as a matter of Secretarial policy, review for legal sufficiency PEB final determinations in the following cases:
  - a. all flag cases
  - b. when requested by SECNAV, DIRNCPB, or President, PEB.
3. return cases determined to be legally insufficient to DIRNCPB for action in accordance with paragraph 4c (4);
4. recommend to ASN (M&RA) via DIRNCPB appropriate



changes to this instruction; and

5. perform such other specific duties and exercise such other discretionary authority as elsewhere set forth in this instruction.

e. Enclosures (1) through (13) comprise the Department of the Navy Disability Evaluation Manual (DEM).

5. **Entitlement Approval.** The entitlement portions of this instruction were approved by the Department of Defense Military Pay and Allowances Committee on 9 November 1989 in accordance with 37 U.S.C. 1001.

6. **Reports and Forms**

a. The management reports required by this directive are exempt from reports control per SECNAVINST 5214.2B.

b. DD 149 (2/86), "Application for Correction of Military Records Under the Provisions of Title 10, U.S. Code, Sec. 1552," is available from the Board for Correction of Naval Records, Department of the Navy, Washington, D.C. 20370.

c. The following forms may be ordered from the Navy supply system CD ROM NAVSUP Pub 600 (NLL):

NAVJAG 5800/15 (3-77), "Injury Report," S/N 0105-LF-105-8075

NAVPERS 1830/1 (2-77), "Application for transfer to Fleet Reserve," S/N 0106-LF-018-3006

NAVMED 6100/2 (5-81), "Statement of Patient concerning the findings of a Medical Board,"

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Assistant Secretary of the Navy  
(Manpower and Reserve Affairs)

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C28G (Branch Dental Clinic, LANT)  
C28H (Branch Medical Clinic, LANT)  
C31D (Branch Dental Clinic, PAC)  
C31E (Personnel Support Activity Detachments, PAC)  
C31J (Branch Medical Clinic, PAC)  
C31K (Medical Administrative Unit, PAC)  
C34C (Support Activity Detachments, EUR)  
C34F (Branch Medical Clinic, EUR)  
C34G (Branch Dental Clinic, EUR)  
C52A (Medical Command Detachment)  
C52D (School of Health Sciences Detachments)  
C52E (Operational Medicine Institute Detachment)  
C52F (Medical Information Management Center Detachment)  
C55A (Naval Personnel Command Detachments)  
C55C (Recruiting District Detachments)  
C55D (Enlisted Placement Management Center Detachment)  
C58Q (Branch Dental Clinic, CNET)  
C58R (Branch Medical Clinic, CNET)  
C61B (Recruiting Command Detachments, Reserve)  
C85A (Branch Medical Clinic, NAVDIS)  
D1A (Naval Council of Personnel Boards)  
D1B (Board for Correction of Naval Records)  
FA4 (Ambulatory Care Center, LANTFLT)  
FA5 (Construction Battalion Center)

FA6 (Air Station LANT)  
FA7 (Station LANT)  
FA8 (Fleet Technical Support Center, LANT)  
FA10 (Submarine Base LANT)  
FA13 (Submarine Support Facility)  
FA18 (Amphibious Base LANT)  
FA24 (Base LANT)  
FA27 (Weapons Station, LANT)  
FA28 (Security Force Company, Marine Corps, LANT)  
FA29 (Security Force Battalion, and Anti-Terrorism Team)  
FA37 (Personnel Support Activity LANT)  
FA40 (Health Care)  
FA47 (Hospital/Medical Center, LANT)  
FA48 (Dental Center, LANT)  
FB6 (Air Facility PAC)  
FB7 (Air Station PAC)  
FB9 (Ambulatory Care Center, PACFLT)  
FB10 (Station PAC)  
FB13 (Submarine Base PAC)  
FB28 (Navy Region, PAC)  
FB34 (Fleet Activities)  
FB39 (Security Force Company and Marine Barracks, PAC, Marine Corps)  
FB48 (Support Facility)  
FB49 (Personnel Support Activity)  
FB58 (Hospital/Medical Center)  
FB59 (Dental Center)  
FB60 (Medical Clinic)  
FC4 (Air Facility)  
FC5 (Support Activity EUR)  
FC7 (Station EUR)  
FC11 (Security Force Company Marine Corps, EUR)  
FC14 (Air Station, EUR)  
FC16 (Medical Clinic, EUR)  
FC17 (Hospital, EUR)  
FC18 (Dental Center, EUR)  
FF1 (Naval District, Washington)  
FF2 (OPNAV Support Activity)  
FF72 (Medical Clinic, Naval Academy)  
FH1 (Medicine and Surgery)  
FH6 (Medical Research Center)  
FH13 (Hospital Corps School)  
FH18 (Operational Medical Institute)

FH20 (Health Research Center)  
FH24 (Medical Information Management Center)  
FH26 (Environmental Health Center)  
FH28 (Health Sciences, Naval School)  
FH35 (Hospital Operations and Training Command)  
FH36 (Healthcare Support Office)  
FH38 (Medical Support Office)  
FJA8 (Reserve Personnel Center)  
FJA9 (Enlisted Personnel Management Center)  
FJA10 (Manpower Analysis Center)  
FM1 (Security Force Company, Marine Corps, Central)  
FO1 (Legal Service Command)  
FO2 (Legal Service Office)  
FO4 (Justice School)  
FR3 (Air Station, RESFOR)  
FR4 (Air Facility, RESFOR)  
FR5 (Air Reserve)  
FR9 (Reserve Readiness Command Region)  
FR10 (Reserve Centers)  
FR14 (Air Reserve Centers)  
FR21 (Recruiting Command, Reserve)  
FT1 (Chief of Education and Training)  
FT2 (Air Training)  
FT4 (Ambulatory Care Center)  
FT6 (Air Station)  
FT13 (Air Technical Training Center)  
FT20 (Construction Training Center)  
FT22 (Fleet Combat Training Center)  
FT24 (Fleet Training Center)  
FT27 (Nuclear Power Training Unit)  
FT28 (Education and Training Center)  
FT29 (Recruit Training Command)  
FT30 (Service School Command)  
FT31 (Training Center)  
FT38 (Submarine Training Center)  
FT39 (Technical Training Center)  
FT44 (Diving and Salvage Training Center)  
FT46 (Fleet Anti-Submarine Warfare Training Center)  
FT51 (Mine Warfare Training Center)  
FT65 (Fleet Intelligence Training Center)  
FT78 (Education & Training Professional Development and Technology Center)  
FT97 (Intelligence Training Center, Navy and Marine Corps)

FT108 (Hospital)  
FT109 (Dental Centers)  
FT111 (Occupational Safety and Health and Environmental Training Center)  
FW1 (National Naval Medical Center)  
FW2 (National Dental Center)  
FW4 (Medical Clinic)  
V (Shore Activities Under the Command of the CMC)